

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS  
EASTERN DIVISION**

In re:

BENJAMIN R ESQUIVEL  
GUADALUPE J ESQUIVEL  
Debtor(s)

Case No. 06-09053

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**CHAPTER 13 STANDING TRUSTEE'S FINAL REPORT AND ACCOUNT**

Glenn Stearns, chapter 13 trustee, submits the following Final Report and Account of the administration of the estate pursuant to 11 U.S.C. § 1302(b)(1). The trustee declares as follows:

- 1) The case was filed on 07/28/2006.
- 2) The plan was confirmed on 10/25/2006.
- 3) The plan was modified by order after confirmation pursuant to 11 U.S.C. § 1328 on NA.
- 4) The trustee filed action to remedy default by the debtor in performance under the plan on NA.
- 5) The case was completed on 03/10/2009.
- 6) Number of months from filing to last payment: 31.
- 7) Number of months case was pending: 37.
- 8) Total value of assets abandoned by court order: NA.
- 9) Total value of assets exempted: \$39,350.00.
- 10) Amount of unsecured claims discharged without payment: \$0.00.
- 11) All checks distributed by the trustee relating to this case have cleared the bank.

**Receipts:**

Total paid by or on behalf of the debtor	\$75,101.59
Less amount refunded to debtor	\$869.92

**NET RECEIPTS:** **\$74,231.67**

**Expenses of Administration:**

Attorney's Fees Paid Through the Plan	\$574.00
Court Costs	\$0.00
Trustee Expenses & Compensation	\$3,432.51
Other	\$0.00

**TOTAL EXPENSES OF ADMINISTRATION:** **\$4,006.51**

Attorney fees paid and disclosed by debtor: \$1,926.00

**Scheduled Creditors:**

Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
ALARM ONE	Unsecured	944.83	NA	NA	0.00	0.00
AMERICAN GENERAL FINANCE	Unsecured	NA	1,226.53	1,226.53	1,226.53	0.00
ASSOCIATED PATHOLOGISTS/JOLIET	Unsecured	18.00	NA	NA	0.00	0.00
ASSOCIATED RADIOLOGISTS	Unsecured	55.00	NA	NA	0.00	0.00
AT&T CABLE SERVICES	Unsecured	184.16	NA	NA	0.00	0.00
CCS INC	Unsecured	57.80	NA	NA	0.00	0.00
CHICAGO TRIBUNE	Unsecured	10.00	NA	NA	0.00	0.00
COPLEY NEWSPAPERS	Unsecured	16.00	NA	NA	0.00	0.00
CREDITORS DISCOUNT & AUDIT	Unsecured	321.00	504.92	504.92	504.92	0.00
DUPAGE PATHOLOGY ASSOC	Unsecured	15.00	NA	NA	0.00	0.00
EMERGENCY HEALTHCARE PHYSICI	Unsecured	580.00	NA	NA	0.00	0.00
FAMILY DENTAL CENTER	Unsecured	61.00	NA	NA	0.00	0.00
FINGERHUT CREDIT CORP	Unsecured	166.82	NA	NA	0.00	0.00
FISCHER MANGOLD JOLIET	Unsecured	274.00	NA	NA	0.00	0.00
GOODWIN & BRYAN	Unsecured	33.90	NA	NA	0.00	0.00
GUARDIAN ANESTHESIA	Unsecured	25.00	NA	NA	0.00	0.00
HINSDALE HOSPITAL	Unsecured	30.00	NA	NA	0.00	0.00
ILLINOIS DEPT REVENUE	Priority	NA	1,461.98	1,461.98	1,461.98	0.00
JOLIET FURNITURE MART	Secured	406.00	405.50	405.50	405.50	0.00
JOLIET RADIOLOGY	Unsecured	25.00	NA	NA	0.00	0.00
MAZDA AMERICAN CREDIT	Unsecured	NA	10,918.08	10,918.08	10,918.08	0.00
MAZDA AMERICAN CREDIT	Secured	5,000.00	5,000.00	5,000.00	5,000.00	0.00
MICHAEL BORDERS MD	Unsecured	40.00	NA	NA	0.00	0.00
PRAIRIE EMERGENCY SERVICE	Unsecured	516.89	NA	NA	0.00	0.00
ROLAND PEDIATRICS	Unsecured	123.00	NA	NA	0.00	0.00
SILVER CROSS HOSPITAL	Unsecured	423.76	NA	NA	0.00	0.00
ST JOSEPH MEDICAL CENTER	Unsecured	997.92	NA	NA	0.00	0.00
ST JOSEPH MEDICAL CENTER	Unsecured	6,602.05	NA	NA	0.00	0.00
TRICAP INVESTMENT PARTNERS	Unsecured	640.57	650.62	650.62	650.62	0.00
WASHINGTON MUTUAL BANK	Secured	18,548.00	18,547.09	18,547.09	18,547.09	0.00
WASHINGTON MUTUAL BANK	Secured	NA	0.00	31,510.44	31,510.44	0.00

**Scheduled Creditors:**

Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
WILL COUNTY COURT	Unsecured	750.00	NA	NA	0.00	0.00
WOMAN & CHILDRENS HEALTH INST	Unsecured	40.00	NA	NA	0.00	0.00
YATIN SHAH MD	Unsecured	165.00	NA	NA	0.00	0.00
YATIN SHAH MD	Unsecured	15.00	NA	NA	0.00	0.00

**Summary of Disbursements to Creditors:**

	<u>Claim Allowed</u>	<u>Principal Paid</u>	<u>Interest Paid</u>
<b>Secured Payments:</b>			
Mortgage Ongoing	\$31,510.44	\$31,510.44	\$0.00
Mortgage Arrearage	\$18,547.09	\$18,547.09	\$0.00
Debt Secured by Vehicle	\$5,000.00	\$5,000.00	\$0.00
All Other Secured	\$405.50	\$405.50	\$0.00
<b>TOTAL SECURED:</b>	<b>\$55,463.03</b>	<b>\$55,463.03</b>	<b>\$0.00</b>
<b>Priority Unsecured Payments:</b>			
Domestic Support Arrearage	\$0.00	\$0.00	\$0.00
Domestic Support Ongoing	\$0.00	\$0.00	\$0.00
All Other Priority	\$1,461.98	\$1,461.98	\$0.00
<b>TOTAL PRIORITY:</b>	<b>\$1,461.98</b>	<b>\$1,461.98</b>	<b>\$0.00</b>
<b>GENERAL UNSECURED PAYMENTS:</b>	<b>\$13,300.15</b>	<b>\$13,300.15</b>	<b>\$0.00</b>

**Disbursements:**

Expenses of Administration	<u>\$4,006.51</u>
Disbursements to Creditors	<u>\$70,225.16</u>
<b>TOTAL DISBURSEMENTS :</b>	<b><u>\$74,231.67</u></b>

12) The trustee certifies that, pursuant to Federal Rule of Bankruptcy Procedure 5009, the estate has been fully administered, the foregoing summary is true and complete, and all administrative matters for which the trustee is responsible have been completed. The trustee requests a final decree be entered that discharges the trustee and grants such other relief as may be just and proper.

Dated: 08/25/2009

By: /s/ Glenn Stearns

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Trustee

**STATEMENT:** This Unified Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.